

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 18  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00453704
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>Agborsangaya, Ozong , , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>
Mailing Address <b>10922 Rocky Mount Way</b>		Amount <b>1180.00</b>
City <b>Silver Spring</b>	State <b>MD</b>	Zip Code <b>20902</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Transaction ID : <b>SE.5088</b> Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>216102.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Ahmed, Heba, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>
Mailing Address <b>7685 NW 19th Court</b>		Amount <b>530.00</b>
City <b>Hollywood</b>	State <b>FL</b>	Zip Code <b>33024</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Transaction ID : <b>SE.5060</b> Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>204728.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>1710.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

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Date

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**11 / 03 / 2020**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00453704       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>Ahmed, Sana, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>	
Mailing Address <b>7685 NW 19th Court</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">520.00</div>	
City <b>Hollywood</b>	State <b>FL</b>	Zip Code <b>33024</b>	Transaction ID : <b>SE.5062</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">205248.90</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Al Joubari, Ali, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>	
Mailing Address <b>101 Ocean Gate Drive</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1284.00</div>	
City <b>Atlantic Beach</b>	State <b>FL</b>	Zip Code <b>32233</b>	Transaction ID : <b>SE.5064</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">210997.90</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1804.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Mitha, Amin, , ,

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**(Schedule E)**

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NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00453704       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>Allaiddin, Sanjeela, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>3178 N. Pine Island</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">790.00</div>	
City <b>Sunrise</b>	State <b>FL</b>	Zip Code <b>33351</b>	Transaction ID : <b>SE.5066</b>
Purpose of Expenditure Canvassing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">213597.90</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Alobaidi, Marwah, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>24 Trafalgar Ct</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">120.00</div>	
City <b>Hacketstown</b>	State <b>NJ</b>	Zip Code <b>78404</b>	Transaction ID : <b>SE.5098</b>
Purpose of Expenditure Canvassing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">219462.90</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">910.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00453704       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>Artwell, Deandra, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>	
Mailing Address 17125 SW 142nd Ct		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">340.00</div>	
City Miami	State FL	Zip Code 33177	Transaction ID : <b>SE.5084</b>
Purpose of Expenditure Canvassing	Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>
Name of Federal Candidate BIDEN, JOSEPH R JR, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <b>Austin, Rod, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>	
Mailing Address 107 Heights Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">910.00</div>	
City Clinton	State MO	Zip Code 39056	Transaction ID : <b>SE.5111</b>
Purpose of Expenditure Canvassing	Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>
Name of Federal Candidate BIDEN, JOSEPH R JR, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1250.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00453704       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>Barnaby, Jasmine, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 11 / 2020	
Mailing Address 2455 N. Nob Hill Rd, #201		Amount 1250.00	
City Sunrise	State FL	Zip Code 33322	Transaction ID : SE.5086
Purpose of Expenditure Canvassing	Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 11 / 2020	
Name of Federal Candidate BIDEN, JOSEPH R JR, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►	

Full Name of Payee <b>Barnaby, Sean, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2020	
Mailing Address 2298 NW 81st Street		Amount 1200.00	
City Sunrise	State FL	Zip Code 33322	Transaction ID : SE.5068
Purpose of Expenditure Canvassing	Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 11 / 02 / 2020	
Name of Federal Candidate BIDEN, JOSEPH R JR, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: FL	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	2450.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	
(c) <b>TOTAL</b> Independent Expenditures..... ►	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00453704
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Bland, Icesha, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>
Mailing Address <b>200 Edgewood Avenue</b>		Amount <b>1140.00</b>
City <b>Atlanta</b>	State <b>FL</b>	Zip Code <b>30303</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Transaction ID : <b>SE.5106</b> Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>208353.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Bowers, Aidan, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>
Mailing Address <b>8173 NW 2 Manor</b>		Amount <b>610.00</b>
City <b>Coral Springs</b>	State <b>FL</b>	Zip Code <b>33071</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Transaction ID : <b>SE.5082</b> Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>212542.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>1750.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00453704       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>Dimitri, Crain, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>500 North Brandon Blvd</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">820.00</div>	
City <b>Brandon</b>	State <b>MO</b>	Zip Code <b>39042</b>	Transaction ID : <b>SE.5092</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">206728.90</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <b>Dixon, Lola, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>2298 NW 81st Street</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">165.00</div>	
City <b>Sunrise</b>	State <b>FL</b>	Zip Code <b>33322</b>	Transaction ID : <b>SE.5113</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">212707.90</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">985.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00453704
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Done, Kaitlyn, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>10300 Green Forest</b>		Amount <b>110.00</b>	
City <b>Hernando</b>	State <b>MO</b>	Zip Code <b>38632</b>	Transaction ID : <b>SE.5126</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <b>222267.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Dyer, Staceyann , , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>8872 N. Isles Circle</b>		Amount <b>360.00</b>	
City <b>Tamarac</b>	State <b>FL</b>	Zip Code <b>33321</b>	Transaction ID : <b>SE.5102</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <b>207213.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>470.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

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**11 / 03 / 2020**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 9 OF 18  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00453704	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Edwards, Khalil, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>13219 Barrow Point Lane</b>		Amount <b>280.00</b>	
City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77014</b>	Transaction ID : <b>SE.5115</b>
Purpose of Expenditure Canvassing	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <b>218722.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Erkoc, Muhammet, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>8405 NW 201 Street</b>		Amount <b>935.00</b>	
City <b>Hialeah</b>	State <b>FL</b>	Zip Code <b>33015</b>	Transaction ID : <b>SE.5080</b>
Purpose of Expenditure Canvassing	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <b>211932.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>1215.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

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**11 / 03 / 2020**

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 10 OF 18  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00453704
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Espy, Allyson , , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>
Mailing Address <b>506 Ashton Avenue</b>		Amount <b>60.00</b>
City <b>Clarksdale</b>	State <b>MO</b>	Zip Code <b>38614</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Transaction ID : <b>SE.5127</b> Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>222327.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Espy, Hanna, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>
Mailing Address <b>506 Ashton Avenue</b>		Amount <b>210.00</b>
City <b>Clarksdale</b>	State <b>MO</b>	Zip Code <b>38614</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Transaction ID : <b>SE.5129</b> Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>222537.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>270.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

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**11 / 03 / 2020**

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 11 OF 18  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00453704       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>Graham, Terry, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 19 / 2020</div>	
Mailing Address 115 NW 202nd Terrace, Apt 116		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1655.00</div>	
City Miami Gardens	State FL	Zip Code 33169	Transaction ID : SE.5070
Purpose of Expenditure Canvassing	Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 19 / 2020</div>
Name of Federal Candidate BIDEN, JOSEPH R JR, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____	

8620.82

Full Name of Payee <b>Hard Knocks</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 02 / 2020</div>	
Mailing Address 3521 West Broward Blvd Ste 302		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6983.38</div>	
City Fort Lauderdale	State FL	Zip Code 33312	Transaction ID : SE.5132
Purpose of Expenditure Canvassing	Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>	Date of Disbursement or Obligation MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 02 / 2020</div>
Name of Federal Candidate BIDEN, JOSEPH R JR, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____	

204198.90

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">8638.38</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 12 OF 18  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00453704       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>Jackson, Denzel, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>	
Mailing Address 10137 Heather Sound Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">120.00</div>	
City Tampa	State FL	Zip Code 33647	Transaction ID : SE.5119
Purpose of Expenditure Canvassing	Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>
Name of Federal Candidate BIDEN, JOSEPH R JR, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____	

209713.90

Full Name of Payee <b>Johnson, Chandra, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>	
Mailing Address 721 NW 18 Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">670.00</div>	
City Miami Gardens	State FL	Zip Code 33127	Transaction ID : SE.5123
Purpose of Expenditure Canvassing	Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>11</div><div>02</div><div>2020</div></div>
Name of Federal Candidate BIDEN, JOSEPH R JR, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____	

218442.90

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">790.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

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Date

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Signature

NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00453704         </div>
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Check if ☒ 24-hour report    ☐ 48-hour report    ☒ New report    ☐ Amends report filed on 

M M / D D / Y Y Y Y

Full Name of Payee <b>Moorehead, Ouida , , ,</b>		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>11 / 02 / 2020</div> </div>	
Mailing Address 9874 Helms Trail		Amount <div> <div>620.00</div> </div>	
City Forney	State TX	Zip Code 75126	<b>Transaction ID : SE.5090</b> Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>11 / 02 / 2020</div> </div>
Purpose of Expenditure Canvassing		Category/ Type	001
Name of Federal Candidate BIDEN, JOSEPH R JR, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		<div> <div>219342.90</div> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►

Full Name of Payee <b>Muhsin, Aisha , , ,</b>		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>11 / 02 / 2020</div> </div>	
Mailing Address     16965 SW 38 Street		Amount <div> <div>MM / DD / YYYY</div> <div>100.00</div> </div>	
City	State	Zip Code	<b>Transaction ID : SE.5122</b> Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>11 / 02 / 2020</div> </div>
Mirmar	FL	33027	
Purpose of Expenditure Canvassing		Category/ Type	001
Name of Federal Candidate		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>FL</u>
BIDEN, JOSEPH R JR, , ,			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	
		<div> <div>MM / DD / YYYY</div> <div>212807.90</div> </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>720.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 14 OF 18  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00453704	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Naqi, Sobia, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>6131 Crowne Falls Pkwy</b>		Amount <b>175.00</b>	
City <b>Hoover</b>	State <b>AL</b>	Zip Code <b>35244</b>	Transaction ID : <b>SE.5072</b>
Purpose of Expenditure Canvassing	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <b>213772.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Ndiaye, Fatou Kine , , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>11521 NW 43rd Court</b>		Amount <b>350.00</b>	
City <b>Coral Springs</b>	State <b>FL</b>	Zip Code <b>33065</b>	Transaction ID : <b>SE.5109</b>
Purpose of Expenditure Canvassing	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <b>216572.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>525.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

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**11 / 03 / 2020**

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 15 OF 18  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00453704
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY /  /

Full Name of Payee <b>Ohaeri, Marie , , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>
Mailing Address <b>4123 East 99th Avenue</b>		Amount <b>330.00</b>
City <b>Tampa</b>	State <b>FL</b>	Zip Code <b>33617</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Transaction ID : <b>SE.5117</b> Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>209593.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Raneem , Imad Abbood Al Nuami, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>
Mailing Address <b>3001 Communications Pkwy, Apt 2016</b>		Amount <b>665.00</b>
City <b>Plano</b>	State <b>TX</b>	Zip Code <b>75093</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Transaction ID : <b>SE.5100</b> Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>220127.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>995.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

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**11 / 03 / 2020**

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 16 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00453704
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>Shareef, Zakir, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>
Mailing Address <b>3526 Cockatoo Drive</b>		Amount <b>2030.00</b>
City <b>New Port Rickey</b>	State <b>FL</b>	Zip Code <b>34652</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Transaction ID : <b>SE.5104</b> Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>222157.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Shearer, Corey, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>
Mailing Address <b>204 Siesta Key Court</b>		Amount <b>1150.00</b>
City <b>Locust Grove</b>	State <b>GA</b>	Zip Code <b>30248</b>
Purpose of Expenditure <b>Canvassing</b>	Category/Type <b>001</b>	Transaction ID : <b>SE.5074</b> Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>214922.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>3180.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**11 / 03 / 2020**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 17 OF 18  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>EMGAGE FEDERAL POLITICAL ACTION COMMITTEE</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00453704       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>Siddiqui, Sabeen, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>7685 NW 19th Court</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">320.00</div>	
City <b>Hollywood</b>	State <b>FL</b>	Zip Code <b>33024</b>	Transaction ID : <b>SE.5078</b>
Purpose of Expenditure Canvassing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">205568.90</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <b>White Burton, Maya, , ,</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 02 / 2020</b>	
Mailing Address <b>1201 Bicksler Court</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">125.00</div>	
City <b>Herndon</b>	State <b>VA</b>	Zip Code <b>20170</b>	Transaction ID : <b>SE.5096</b>
Purpose of Expenditure Canvassing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2020</b>	
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">206853.90</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">445.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mitha, Amin, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**11 / 03 / 2020**

Signature

FEC IDENTIFICATION NUMBER ▼

C C00453704

☒ New report ☐ Amends report filed on

Date of Public Distribution/Dissemination

Amount

120.00

Transaction ID : SE.5094

Date of Disbursement or Obligation

Category/ Type	
	001

M M / D D / Y Y Y Y  
11 02 2020

☒ Support

☐ Oppose

Office Sought: ☐ House District: \_\_\_\_\_  
☒ President ☐ Senate State: FL

216222.90

Disbursement For: ☐ Primary ☒ General  
2020 ☐ Other (specify) ▶

Date of Public Distribution/Dissemination

Amount

[illegible]

Category/ Type	
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Date of Disbursement or Obligation

M M / D D / Y Y Y Y

☐ Support

☐ Oppose

Office Sought: ☐ House District: \_\_\_\_\_  
☐ President ☐ Senate State: \_\_\_\_\_

[illegible]

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▶

120.00



28227.38

Mitha, Amin, , ,

*[Electronically Filed]*

Date \_\_\_\_\_

FEC Schedule E (Form 24/28) Rev. 09/2013